

Nevada Attendance Sheet

Title of Activity:			Date of Event:	
Course No.			Number of CEU's:	
Name of Attendee <small>✍️ Print legibly</small>	ID Number <small>✍️ Print legibly</small>	Pest Control Company <small>✍️ Print legibly</small>	Signature of Attendee	Positive ID Checked
John H. Smith Jr.	2002345	S & S Fumigation & Pest Control	John H. Smith Jr.	<input checked="" type="checkbox"/>
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Statement of Provider				
To the best of my knowledge, the above attendees attended and successfully passed this continuing education program. Each of the above indicated attendee presented his/her own Nevada Pest Control License or other government issued photo identification at the time attendance was recorded. Those individuals who fail to present such ID will not receive credit for the program.				
Signature of responsible person:		Name and Title:		Date: